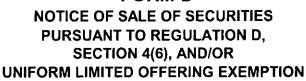
FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

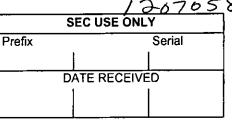


ОМВ	APP	ROVAL

OMB Number: 3235-0076

Expires: March 31, 2009
Estimated average burden

hours per response: 16.00



			<u> </u>	
Name of Offering (☐ check if this is an amendment		d indicate change.)		
Goldman Sachs Global Tactical Trading In				
Filing Under (Check box(es) that apply):	Rule 504 🔲 Rule 505	☑ Rule 506 □	Section 4(6) ULOE	
Type of Filing: ☐ New Filing ☑ Amendm	ient			
	A. BASIC IDENTIFIC	CATION DATA		
1. Enter the information requested about the issu	er			
Name of Issuer (check if this is an amendment	ent and name has changed, an	d indicate change.)		
Goldman Sachs Global Tactical Trading In	stitutional, Ltd.			
Address of Executive Offices (Nu	imber and Street, City, State,	Zip Code)	elephone Number (including Area Co	ode)
One New York Plaza, New York, NY 1000-	4	OE:	(212) 902-1000	
Address of Principal Business Operations (Number and Street, City, State	e, Zip Code) Proce	elephone Number (Including Area Co	ode)
(if different from Executive Offices)	PROCESSED	Section	ı	
Brief Description of Business	MAD OF see	- 204		
To operate as a private investment fund.	MAR 27 2009	MAR 13/	009	
	THOMSON REUTER:			
	☐ limited partnership, alrea) Washington	DC	
corporation	☐ limited partnership, alrea	dy formed 103	✓ other (please specify):	
□ business trust	☐ limited partnership, to be	tonned	Exempted Limited Company	
	Month	Year		
Actual or Estimated Date of Incorporation or Org	ganization: 0 3	0 2	☑ Actual ☐ Estimated	
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Pos	tal Service abbreviatio	n for	
	State: CN for Canada: FN	for other foreign jurise	liction) F N	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Director General and/or Beneficial Owner Executive Officer ☑ Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Investment Manager) (Number and Street, City, State, Zip Code) Business or Residence Address One New York Plaza, New York, NY 10004 Director General and/or ☑ Beneficial Owner □ Executive Officer □ Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) Goldman Sachs Global Tactical Trading Institutional Yen Unit Trust Business or Residence Address (Number and Street, City, State, Zip Code) c/o Walkers SPV Limited, Walker House, PO Box 908GT, Mary Street, Georgetown, Grand Cayman, Cayman Islands ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* □ General Partner and/or Check Box(es) that Apply: *of the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Barbetta, Jennifer Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004 General Partner and/or Executive Officer* Director Check Box(es) that Apply: ☐ Promoter Beneficial Owner *of the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Clark, Kent Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004 Beneficial Owner □ Executive Officer □ Director General and/or Check Box(es) that Apply: ☐ Promoter **Managing Partner** Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Director General and/or ☐ Promoter ☐ Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address

A. BASIC IDENTIFICATION DATA

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	ŗ			B. INI	FORMAT	ION ABC	UT OFFI	ERING				
1											Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									☑			
			A	nswer also	in Appendi	x, Column	2, if filing ι	inder ULOE	Ε.			
2. What is the minimum investment that will be accepted from any individual?										\$1,000,000*		
*The Company at its discretion may accept subscriptions for lesser amounts. 3. Does the offering permit joint ownership of a single unit?								***************************************	Yes ☑	No □		
commi If a per or state	the informants in the information or single in the interest of the interest of the information in the information of the inform	nilar remuno sted is an as ame of the	eration for s ssociated pe broker or de	colicitation or age caler. If mo	of purchase nt of a brok ore than five	rs in connect er or dealer (5) person	ction with some registered some some liste	ales of secu with the SE	rities in the C and/or wi	offering. th a state		
Full Name	(Last name	first, if ind	ividual)									
Goldman, Business o	Sachs & C	o. Address (N	Number and	Street, City	, State, Zip	Code)		 .	_ 	···		<u></u>
85 Broad	Street, Nev	. Vork Nei	v Vork 100	04								
	ssociated E				-							<u></u>
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Check "	All States" of	or check ind	ividual Stat	es)								l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	(PA)
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
				* A						_		
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated E	roker or De	aler						. <u>. </u>		_	
						 						
	Vhich Perso All States" (***************************************		🗆 Al	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	(Last name			<u> </u>						-		
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)	***		·		-	
Name of A	Associated E	Broker or De	aler						<u> </u>			
	Vhich Perso							*****				All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[JA]	[KS]	[KY]	[LA]	[ME]	[BD]	[MA]	[M]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[KN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
נסוז [נינאל	[פר] [אר]	[GD]	[TN]	(TX)	[LUT]	(VT)	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$	0
	Equity (Shares)	\$	57,630,647	\$	57,630,647
	☐ Common ☐ Preferred			•	
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	\$_	0	\$	0
	Other (Specify)	\$_	0	\$	0
	Total			\$	57,630,647
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Nombra		Aggregate Dollar Amount
			Number Investors		of Purchases
	Accredited Investors	_	36	\$.	57,630,647
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		m c		D. II. A
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total		N/A	\$	N/A
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$.	0
	Printing and Engraving Costs			\$ _	0
	Legal Fees		\square	\$	18,073
	Accounting Fees		0	\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify):			\$	0
	Total		図	\$	18,073

<u>PENS</u>	ES A	AND USE OF P	ROCE	EDS	
a. Th	is		\$_		57,612,574
know lof th	n, ne				
		Payments to Officers, Directors, & Affiliates			Payments To Others
	\$_	0		\$_	0
	\$ _	0		\$_	0
	\$_	0		\$_	0
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	s –	0	-	s –	0
	\$ \$	0	. – Ø	* - \$	57,612,574
	\$ _		. =	\$ _	57,612,574
		☑ \$	57,6	12,57	4
<u>RE</u>					
ccuriti	es and	d Exchange Comm	nission,	upon	r Rule 505, the written request
		Date March]2, 2009			
		<u> </u>	-		
	o Part a. Th oropose known l of th respons	o Part C a. This oroposed known, I of the response	Payments to Officers, Directors, & Affiliates Solution of the response Payments to Officers, Directors, & Affiliates Solution of the response Solution of the response Payments to Officers, Directors, & Affiliates Solution of the response Solution of the response Solution of the response Payments to Officers, Directors, & Affiliates October of the response Solution of the response October of the response O	o Part C a. This oroposed known, I of the response Payments to Officers, Directors, & Affiliates	a. This

ATTENTION

David Kraut

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).